

MEDICAL AND SURGICAL REPORTER.

No. 841.]

PHILADELPHIA, APRIL 12, 1873. [VOL. XXVIII.—No. 15

ORIGINAL DEPARTMENT.

COMMUNICATIONS.

BLISTERING IN RHEUMATISM.

BY J. K. P. GLEESON, M. D.,
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The following case is reported, thinking it may be of interest to some readers of the REPORTER, as it was a most interesting and satisfactory case to me:—

June 3d, 1872, was called to see L. V., who was said to be suffering from a painful swelling in his leg. He was a man about sixty-five years of age, and I found him in bed, where, he told me, he had been most of the time for nine months.

He was exceedingly anæmic in appearance, very weak, and his countenance indicated a great anxiety, and intense physical suffering.

On examination, his left leg was found to be greatly swelled, from the hip to below the knee, the hip-joint not being involved or interfered with, to any extent, but the knee-joint was so much involved that it could be flexed only *very slightly*. The whole internal portion of the thigh presented a compact oedematous condition, quite hard to the touch, but pitting on pressure, and extremely painful and sore.

The size of the thigh at the middle was 18 inches, and of the knee, around the joint, 13½ inches, and the right leg measured at the same points 14 and 12½ inches, respectively.

The history of the man was as follows:—He had always enjoyed very good health, but during the last ten years had been sub-

ject to occasional attacks of pain, which had been called *neuralgia*, but he had never considered himself as subject to rheumatism. About a year previous to this, however, his leg had begun to pain him, and he soon observed that it was swelled. It grew rapidly worse, and for nine months it had confined him to the house, and the most of the time to his bed. He had been treated, at intervals, by several different physicians, locally by poultices, painting with iodine, rubbing with liniments, etc., but obtained no relief by any of the means employed, and was finally told that there was but little if any chance of his recovery, and that it was of little use for him to pursue any other course of treatment.

My diagnosis of the case was that I had here a condition of chronic rheumatism, or rather, perhaps, the sequelæ of a rheumatic diathesis which had long existed in the system, and which finally had localized itself at the point named.

Notwithstanding the extreme debility of the patient, and contrary, I believe, to most of the text books upon this point, I decided to apply the blister treatment, and three blisters were applied, three inches wide, and long enough to encircle more than half the leg; the first, just above the knee-joint, and the others, one inch apart, and above the first, upon the front and inner portion of the thigh. When the blisters had drawn well they were removed, and warm poultices applied for twenty-four hours, after which a dressing of ungt. basilicon was applied. The blisters were renewed at such intervals as was deemed necessary, for the period of about two weeks. In the mean-

time he had been placed on a liberal and sustaining diet, and here I will remark that his appetite, which at first was voracious, remained good throughout, so that he could eat anything which was allowed him; as an internal remedy he took vin. colch. rad. gtt. 60 to 80 daily.

June 12th, the knee measured 13 inches, and there was also a diminution of $\frac{1}{2}$ an inch in the lower third of the thigh, and a perceptible softening at the same point. The pulse in the meantime had ranged from 68 to 82. June 20th, a careful examination convinced me that an abscess was forming, and the blisters were discontinued, and poultices of flaxseed meal ordered, to be frequently renewed, and kept constantly warm. This was continued until June 30th, when I decided to open the abscess, and upon doing so, a free discharge of bloody pus followed, affording entire relief from pain, and reducing the size of the leg very perceptibly. A probe could be introduced in an upward direction for eight inches without obstruction.

The poultices were continued, and there was a daily discharge of pus, up to July 30, when the patient was able to sit up half the day; his pulse had fallen to 64, and the size of the thigh had materially decreased throughout its whole extent. The knee-joint, however, remained much enlarged, and admitted of but slight motion, consequently the blisters were again applied above and below the joint, and the patient directed to exercise the joint slightly every day. He was now able to sit up most of the time, and rested well at night. Iron and quinine were now given in liberal doses. August 4th, he went down stairs and was able to walk about the house, with the aid of a cane and crutch, his only difficulty being the stiffness of the knee-joint, and some considerable swelling of the ankle. He continued, however, to improve steadily, and August 25th was able to walk out of doors a considerable distance, with the aid of his cane.

I did not see him again until about October 1st, when I found him almost entirely well; his only complaint was a stiffness of the knee-joint, but he said he was daily improving in this respect.

A few weeks since, I called to see him and he told me he was as sound as ever, and upon a careful examination, and comparison of this leg with the other, I was unable to discover any difference, either in the size

or action, and he assured me that he was entirely free from pain, and that his general health was as good as it had ever been, so far as he was able to judge.

REMARKS ON INFLAMMATION AND ULCERATION OF THE OS AND CERVIX UTERI.

BY R. L. PAYNE,
Of Lexington, N. C.

Some twelve months since you did me the honor to publish in the *REPORTER* a communication on Ulceration of the Os and Cervix Uteri, since which time I have treated some twenty-five or thirty cases of uterine diseases, and I am more than ever impressed with the correctness of some of the views expressed in my former article.

I did not claim originality, nor do I now in what I have to write, but I believe it to be the duty of every physician to give the profession the benefit of his experience, and thus make some honest effort at least to add his mite to the great fund of medical knowledge.

In the present article I only wish to make a few observations upon the diseases above mentioned, and give a report of one case which came under my care.

I do not believe that the local lesions of the os and cervix are at all dependent upon the general ill health of the patient, but on the other hand do most emphatically adhere to the opinion that the general constitutional symptoms are *caused* by the local lesions, because I have never yet met a patient who did not improve in color, flesh, strength and vivacity, "*pari passu*," with the improvement in the local lesions, and I have never seen one who improved to any great extent until the local lesions were attended to and local applications made.

I do believe that such patients will improve more rapidly with judicious local treatment, without constitutional, than they will with constitutional, without local treatment, provided they are fed upon the same food, and allowed the same water, air, recreations, etc. At the same time I do not wish to be understood as objecting to, or doubting the efficacy of constitutional treatment, for I think it of great importance conjoined with the local treatment.

Upon this particular point the words of Prof. Thomas are sensible, pithy, and true, and I can adopt and indorse them most

heartily. He says, "The statement which we often meet with, that the majority of the cases of uterine disease require no local treatment whatever, is a fallacy based upon strong prejudice against one of the most important modern improvements in medicine, or upon want of experience in such cases."

Some of these cases prove very obstinate, yet the greater majority will recover under a judicious treatment, and I hold that no treatment can be regarded as such which rejects the speculum and local applications.

In the majority I find the congested, puffy, gaping patulous, and sometimes everted condition of the os and cervix, spoken of by different authors (Thomas says so patulous as to admit the tip of the finger; and I have seen them so patulous as to admit a small finger to the first joint, but this is by no means definite), and I cannot believe that it is dependent upon subinvolution of the womb, since it is not only seen in women who have borne children, but is unquestionably sometimes found in nulliparae, and occasionally even in virgins. Of course the mouth is patulous in subinvolution, but so common is it in these cases that I regard it as one of the best physical signs of ulceration, or parenchymatous inflammation of the os and cervix.

I have used almost all the caustics generally employed in such cases, and I very greatly prefer the nitrate of silver, nor do I agree with a recent writer in the REPORTER, that it is at all more apt to be followed by severe hemorrhages than carbolic acid, or any of the other caustics, if cautiously used. Our much respected and now lamented Professor, Chas. D. Meigs, used to say to his class, "Gentlemen, there is a destructive as well as curative application of the nitrate of silver! please remember this!" and now my own experience confirms the truth of his remarks, consequently, I almost always use the solution; however, in very obstinate cases I sometimes resort to the solid stick, and I have seen hemorrhages follow, but I have always attributed their occurrence to my destructive use of the remedy, and not to any fault in the remedy itself.

Creasote, alternated with the argenti-nitras, I think sometimes answers a good purpose.

No fact is better established in gynecology than that inflammations in this locality are among the most potent causes of sterility in the female, yet all gynecologists will admit

the possibility of conception occurring in particular instances, even with inflammation, or ulceration of the os and cervix, more especially when the disease is confined chiefly to the vaginal surfaces of the lips. When conception does occur under such circumstances, is it not highly probable that the physiological changes which are superinduced in the parts by the conception sometimes bring about a cure of the diseased condition? I think so, yet my experience would lead me to believe that the majority of those women who conceive with an inflamed or ulcerated os or cervix abort before the fifth month of gestation. Parturition and abortion are acknowledged to be fruitful causes of cervical inflammation and ulceration, and "vice versa." I believe these diseased conditions to be sometimes the *exciting causes* of miscarriages. Let me cite a case in illustration of this opinion. Five years ago a gentleman brought his wife to me to consult about her health. Her general health and appearance were bad. She was twenty-six years of age, had been married five years, had borne no living children, but had miscarried three times between the third and fourth months.

She was pale, somewhat emaciated, suffered from cephalalgia, and indigestion, had a constant sense of heaviness and dragging within the pelvis, pains in the back, loins, and along the hips, and was troubled with catamenial irregularities and leucorrhoea. I gave the opinion that all her ills proceeded from a diseased womb, and suggested examinations with the speculum, probe, etc., but they being of that over-fastidious class who regard the speculum as a demoralizing agent, declined an examination, and I declined any further care of the case. In a short while after this I was mortified to learn from some of his confidential friends that he had represented me as proposing an examination, to which he would not consent, but consulted another physician, who was very much surprised at my course, and promised a cure without any examinations per vaginam.

This state of affairs was exceedingly annoying to me then, and subsequently, but I have enjoyed the satisfaction of having my former diagnosis verified beyond the shadow of a doubt.

The gentleman requested me again to take charge of his wife, and was willing to submit to any treatment I thought necessary. I found the same train of symptoms, but

greatly more aggravated. She had become exceedingly nervous, was more emaciated, her spanæmia was more marked, her leucorrhœa more copious and blood-stained, and her general condition one of great debility, but she had not aborted since I first saw her. I found the os patulous, the lips thickened, and the whole inner portion in a state of granular ulceration.

Sims' probe was introduced after some difficulty, but elicited no signs of disease above the os internum; however, I dilated with a sponge tent, and found that the ulceration did not extend beyond the neck.

The case was treated like those mentioned in my former article, upon the plan recommended by Dr. Thomas. Tonics, both mineral and vegetable, were given internally, the bowels were regulated by aperients, the ulcerated parts were thoroughly touched with a solution of nitrate of silver, thirty grains to the ounce of water, injections of sulphate of zinc were used by means of a Matson's syringe, good food and moderate exercise in the open air were advised, and separate beds suggested. Under this treatment she improved rapidly in flesh, strength and general appearance, and at the end of two months the ulceration was greatly better, and I was confident of a speedy return to health, but about this time, disregarding my suggestion in respect to separate beds, she became pregnant, and three months afterwards aborted. She received no local treatment from her conception until several months after her abortion, when she was again subjected to the same application, and was, in due course of time, discharged in the enjoyment of apparent good health, and now vigorous, hopeful and promising, she indulges all the fears, the doubts, and the happy anticipations of the eighth month of pregnancy.

CARBOLIC IRRITANT—(LOTIO ACETI CARBOLICI).

BY DR. GEORGE W. LAWRENCE,
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Few articles among the list of medicinal agents have received, lately, more attention from the profession than carbolic acid and its preparations. Since Calvert gave importance to the discovery of Runge, by purifying carbolic acid, it has proved a valuable addition to our therapeutics. Yet, like most new remedies, it has been too much

extolled, and properties have been ascribed to it that do not really belong to any agent. But it serves a purpose in the materia medica that few known medicines can perform. The affinity that carbolic acid has for organic matter surely places it in the foremost rank of all articles known, of its class. It is not so valuable to fix noxious volatile gases, to arrest organic vapors and effluvia, as it is serviceable in its positive affinity for more material or solid substances.

The antiseptic or anti-zymotic powers are real. The offices it performs as a *cauterant*, *counter-irritant*, *revulsant*, *rubefacient*, *stimulant*, *local anæsthetic*, are functions in an agency superior to any other known remedy, if properly employed. A few years ago we made known the combination called "*carbulated glycerin*" (*glycerinum acidî carbolicî*), viewing it as one of the most convenient and desirable compounds of that article in general use. We now introduce the following preparation of carbolic acid, blended with its pyroligneous kindred, for external use, viz.:

R Carbolic acid (Calvert's).	3j.
Acetic acid (pure),	3ss.
Water,	3ss.M.

S. Apply with camel's hair brush, as directed.

The above formula is one of the most prompt remedies that we can safely employ for the respective offices. Experience proves that it is preferable to the ammoniated lotions, and it is more efficient than applications of mustard, in every emergency. For continuous use, in chronic cases, it is superior to the purest Darmstadt veratria, and it does not produce the disagreeable *pustular action* caused by tartarized antimony, croton oil or "Baunscheidt's oil." It has none of the unpleasant effects of *vesicants* upon the surface. The celerity of its action gives it many advantages whenever prompt agency is required.

When prescribed for children (except in those cases where immediate revulsive action is required), it is usually diluted with water. We also dilute it in the treatment of skin diseases, as a *parasiticide*, and when applied to relieve *formication* and *pruritis* of the surface. In *serpiginous* and *phagedenic ulcers*, in *gangrenous*, *hemorrhagic* and *ill-conditioned ulcerated surfaces*, we dilute the preparation (a tablespoonful to the pint of water), and use it as

a spray. Employed in this manner it is also a good disinfectant.

We use this *counter-irritant*, generally, in chronic cases; in the treatment of muscular distortions (curvature) of the spine, spinal irritation, locomotor ataxy, paralysis agitans, chorea, neuralgia, sciatica, cerebral and spinal meningeal congestion. We use it, applied to the nape, in epilepsy, and whenever demanded to relieve local hyperæsthesia; also as a derivative to prevent translation in paroxysms of gout.

We would suggest the application, as a *revulsive*, in the invasive form of "*cerebro-spinal meningitis*." Yet we would ever

rely, with more confidence, on the use of quinine as a stimulating tonic, proper nutrients, and bodily hygiene, as *prophylactics*, to relieve *malarial cachexia*, during the prevalence of the latter named disease, than to await the attack for any advantages in the treatment.

The "*carbolic-irritant*," according to the recipe in strength, should not be employed more than once or twice a day, even where active properties are desirable. Usually, in chronic cases, it is applied every day until the parts become quite sensitive; it is then employed once every second or third day, as the case may require.

EDITORIAL DEPARTMENT.

PERISCOPE.

Cases of Exophthalmic Goitre.

The following cases in the Royal Hospital for Diseases of the chest were under the care of Dr. DOBELL, and are reported in the *British Medical Journal* :—

Elizabeth W., aged 23, widow, was admitted as an in-patient on December 19th, 1872. She presented in a moderate degree each and all of the characteristic symptoms of Graves' disease; viz., general anæmia, prominent eyeballs, enlarged thyroid, excitable and rapid heart's action, and disturbance of the generative organs. In addition there were extensive chronic catarrhal signs throughout both lungs, with some disintegration of the left upper lobe, accompanied with muco-purulent sanguinolent sputa. There was no loss of flesh. The catamenia had been absent for eight months. Her father died of paralysis, at the age of 48; her mother of consumption, aged 35. Her husband died nine months ago, of consumption, at the age of 25. No disease of the heart or thyroid body was known in the family. The patient was born at Lea Bridge, but had never had ague. At seven years of age she had enlarged tonsils, which were removed by operation. She remained weakly up to 14, and at that time both tonsils were again excised. The catamenia appeared at the age of 14, continued regular up to 16, and then disappeared. At the age of 16½, she married, became pregnant, and during pregnancy had two attacks of "inflammation of the lungs." Her first confinement was prolonged and difficult, followed by jaundice and by "inflammation of the womb,"

which laid her up three months. The cough from which she suffered ever since began at this time, generally being worse in autumn and winter, and better in summer. The second confinement occurred three years after the first; a month afterwards she had "inflammation of the lungs," succeeded by "gastric fever," which laid her up two months. At this time general swelling of the body and legs occurred, and also slight swelling of the thyroid gland. About six months after the gastric fever (eight months after confinement) she miscarried at two months, with considerable flooding; and this was followed by inflammation of the lungs. It was after this that the thyroid enlargement, previously very slight, began to increase; and the eyes were first noticed to protrude, especially during violent coughing. At this time (December, 1870,) she was treated by Mr. Gay, and thought she was much benefited by a mixture containing two and a half grains of sulphate of quinine for a dose twice a day; the swelling of the throat disappearing. In April, 1870, being again in general bad health and suffering from cramps in the hands, she again applied to Mr. Gay, and was treated with ammonia, rhubarb, calumba, peppermint, and compound tincture of lavender, with only slight relief. She became a patient of Dr. Eustace Smith, at the Metropolitan Dispensary, without, however, getting much benefit. After this, about twelve months ago, she was under Mrs. Garrett-Anderson for inflammation of the lungs, and derived some benefit. Three months afterwards she became an out-patient at Victoria Park Hospital, but without much improvement.

Dr. Dobell admitted the patient with the special object of fairly trying the effect of

veratrum viride upon the heart's action. She had been already taking syrup of iodide of iron in drachm doses three times a day (as an out-patient), with advantage to her general health. This was continued; and inhalations of conium and carbolic acid were used for the lung-complication. At this time the pulse varied from 93 to 120, according to whether the patient was quiet or a little excited, never sinking below 92 even in sleep, and generally being over 100. Aconite was given (the patient being kept quiet in bed), at first in two-minim doses of the tincture every four hours (begun on December 20th), and increased to three minims on the 23d, and again to five minims on the 30th. These doses were followed by headache and swimminess, but had no effect on the rate of the pulse, or on the excitability of the heart. The aconite was then stopped, with relief to the headache and swimminess, but with no alteration of the pulse and heart. After an interval of twelve hours, the veratrum viride was begun on January 3d. Five-minim doses of a tincture prepared by Messrs. Hanbury were given three times a day. The dose was increased to seven minims on the 5th; to ten minims every four hours, night and day, on the 8th; and increased to ten minims every three hours on the 10th. This produced some nausea; and the dose was, therefore, not further increased, but persisted in until, on the 21st, severe sickness continued for several hours, when, on the 22d, it was thought advisable to stop the remedy, as no material effect had been produced upon the rate of pulse throughout, except during the intervals of vomiting, when the nausea depressed it to 80, as might have been the case from any ordinary emetic; and it rose again to 120 immediately afterwards. Except the nausea and vomiting, no appreciable effect was observable from the veratrum. The syrup of iodide of iron was continued, and also the inhalations of conium and carbolic acid. The temperature remained normal, and the measurement of the neck stationary. She remained in hospital till February; and during her stay menstruation returned naturally for the first time after a cessation of eight months, and again at the normal interval. Her general health and strength, and the lung-symptoms, were much improved. The patient was removed to the London Infirmary for Epilepsy and Paralysis, where the galvanic treatment is now being sedulously pursued.

Dr. Dobell remarked that this case agreed with all the cases of exophthalmic goitre he had yet seen, in having a history of causes of nervous perturbation connected with the generative system. In a case now under his care in private practice, in which the eyes were so protruded that the lids were continually slipping behind the globes, and the heart's pulsations seldom less than 130 to 140 per minute, the symptoms came on rapidly after a severe fright, accompanied by prolonged anxiety, during the first week of a honeymoon.

The Diagnosis of Small-pox and Measles.

Sir WILLIAM GULL, in a lecture published in *The Doctor*, says:—

To-day I wish first to refer again to a case in which I made a false diagnosis, and drew a wrong conclusion; but it was because wrong data were given me. A young woman was admitted with a rash over her, the face red, and papillæ over the skin. I did not look much at it, indeed, I expressly avoided doing so; but I asked her how long she had been ill and when the rash came out, and she said she had been taken ill on the Tuesday, and that the rash came on the Thursday, and she said she had had pain in the back and sickness. Now, this was the history of small-pox; and, as I have told you before, the cases of error I have seen in distinguishing between small-pox and measles have been from studying the rash. So I abstained from looking at it. This girl gave a definite account of forty-eight hours' illness before the rash, and so I said, it's small-pox. But now it has turned out to be measles. We come to another history, and find that she had really been ill longer.

How, then, are we to get out of this dilemma? On the one hand the rash deceives us, on the other, if we fall back on the history, we are liable to get an incorrect one.

In the first place we must remember there is a danger of mistaking the two. In the first few days one feels the rash raised, like little shot beneath the skin, as they say. We ask if there has been pain in the back? Yes. Sickness? Yes. Then we say it is small-pox; but no. These may be in measles also. And so we are deceived.

But, then, the duration and the character of the preliminary fever are different, in measles this being of a catarrhal nature; and I thought if I could fix in my own and in other people's minds *the time*, that we should so avoid the error; but, as this case shows, there arises another danger here from the uncertainty that attaches to the history we get, especially among hospital patients; I say especially among them, for in private practice there is much less danger of being deceived in this way; people living in greater comfort will give you more exact and definite histories. They notice and remember how and when they became ill. But the working people don't do this; they don't reckon themselves ill so long as they can manage to do their day's work. So that we must remember that among the working people the preliminary history is very doubtful. Often you will find they cannot tell you, and the more you question them, simply the more confused they get. So if you are in doubt I advise you to wait. You cannot by any means yet known to me always tell, and a few hours will put it beyond doubt; but the test is a good one. It is proved to be so even by this exception. For if we had had the true history we should have decided rightly, and a most interesting light is thrown on fevers themselves by this fact of the definite periods of their progress; for fevers are, in truth, like mechanical

agencies, they are tested by the time they take to operate, they are like forces, and determine their effects in certain times.

Surgical Treatment of Hemorrhoids.

On this subject, Mr. HENRY SMITH read a paper before the Medical Society of London:—

He commenced by referring to the first recorded cases of the treatment in question which were given to the Profession in the Lettsomian Lectures, delivered before the Fellows in 1855. At that time the cases he had operated upon were only thirty-eight, but the results of these induced him to continue the treatment. As his experience increased, he gradually began to discard the use of the ligature, and he finally gave it up altogether, partly in consequence of some disastrous results in his hands, and partly from the excellent experience of the clamp and cautery. He now had operated on upwards of 300 cases, and many of them of the most severe and formidable character, both locally and generally, and he would lay fairly before the Society the results of his extensive experience. He would first refer to some of the objections which had been made against the treatment in question, some of which were quite frivolous, such an one, for instance, as had been urged against it by a well-known writer on diseases of the rectum, who affirmed that the operation was bad because more than an hour was consumed in performing it, the truth being that five, ten, or fifteen minutes were ample, as far as the actual operation was concerned, according to the nature and magnitude of the disease. As regards the mortality which had occurred in his hands, he had already laid before the Profession two instances where death had taken place after the operation, and since that period a third fatal case has occurred, in the instance of a gentleman in broken-down health, on whom he had performed a somewhat severe operation; severe vomiting set in and continued thirty-six hours, and then intense jaundice followed, the patient dying on the fifth day. There was no *post-mortem* examination; and thus it was impossible to say whether death was caused by the chloroform or from some latent liver disease which had been aroused into activity by the operation. Only in two instances had anything like severe constitutional disturbance arisen after the operation. With reference to hemorrhage, which was pronounced by some as a grave objection to the operation, he had not met with one single case where he had to plug the rectum, and only one instance where it was necessary to inject iced water. This immunity from bleeding he considered to be due to the great care with which he applied the cautery, using it very freely and with instruments of various shapes and sizes. He had never seen ulceration occur and persist for a length of time after the operation in any single case in his practice. The period of convalescence was short in the ma-

jority of his cases; the patients were walking about in a week. He had never known erysipelas or secondary abscess to occur after operation, a condition which occasionally gave great trouble after the use of the ligature, and the pain which ensued was generally at an end after two or three hours. The author then made some special observations regarding the mechanism of the instruments he used. Above all things it was most necessary that the blades of the clamp should have a perfect parallelism when they closed, and it was very important, after the cautery had been applied, to unscrew the blades very gradually in case any vein should have escaped the influence of the cautery. There existed considerable difference of opinion as to the value of the non-conducting plates of ivory attached to the clamp, but he never thought of operating without them, and if the patient did not take chloroform they were absolutely necessary, as they entirely prevented the pain of the cautery.

The Vermicular Motion of the Urethra.

Not long since, at the Surgical Society of Ireland, Dr. MACNAMARA said that many years he held (as, indeed, he had been taught) that foreign bodies lodged in the urethra had a tendency to be thrust forward. But, on inquiring more closely into the matter, he was led to believe in the existence of a vermicular action in the urethra, acting from without inwards on a body presenting a sufficiently large superficies. A calculus was thrust forward by the *vis a tergo* of the urinary stream, which overbalanced the vermicular action, as the latter had only a small surface whereon to act. But a catheter, when left in the urethra, had a tendency to pass towards the bladder, and to prevent it from doing so, it was often necessary to apply a jugum. The object of this vermicular action was clearly to prevent leakage from the bladder. In the volume of the *Dublin Hospital Gazette*, for 1858, Mr. Fleming had spoken of a sucking power, or vermicular action of the urethra, in certain cases, but no mention was elsewhere made of this physiological property of the part. The President remarked that the number of cases where portions of catheter found their way into the bladder strongly confirmed Dr. Macnamara's interesting and novel remarks.

The Morbid Effects of Religious Excitement.

Professor C. H. THOMAS, in his address at the last commencement of the Woman's Medical College, uses the following earnest and striking language:—

You will be called to consider few causes of disease which are more potent or widely diffused and actively operative throughout society than morbid forms of religiousness. While it is and must ever remain true that there is no greater conservator of health of mind and body, as well as the spirit, than the

possession of that cheerful mental poise which comes of a faith which works by love, purifying the heart; it is also as true that no influence is more depressing, exhausting, or more devitalizing in its tendencies, than that sense of impending evil and woe under the burden of which so many souls struggle through life. A popular divine has said that it is a great credit to many people's hearts that their heads go crazy; and you will not seldom have urgent occasion to call your distressed fellows away from the depressing backward gaze at the terrors of "Sinai" to the exhilarating onward view of the glories of Calvary; from the sickening fear of an avenging Nemesis to a calm, invigorating trust in that beneficence which has placed underneath our world its everlasting arms.

The Generative Power in Man.

Dr. H. A. NICHOLSON has some curious reflections on this subject, in a late number of the *Edinburg Medical and Surgical Journal*. He says:—

The most important point is that, taken as a whole, we may regard the generative expenditure of animals solely as a tax upon the organism, rendered requisite by the necessity that the species should be perpetuated.

Now, comparing men with the other mammals, the first and most striking point of divergence is, that the female admits the male at all periods, except the brief intervals occupied by the process of menstruation; and even this restriction is not universally observed. As the menstrual periods in a healthy woman occupy at most but one week out of four, the generative expenditure of the male is extended, during adult life, over nine months in the year, or three-fourths of his sexually mature existence.

In the second place, as union between the sexes takes place during the period of gestation, it follows that a large amount of the generative expenditure of man, unlike that of any other animal, *has no direct bearing whatever upon the perpetuation of the species*.

Thirdly, this extra generative expenditure is just as important in its bearing upon the individual as if it were directed to the main and primary end of the generative expenditure of man.

Fourthly, the generative expenditure of man, as a monogamous animal, is, as a rule, continued long after the period at which the female ceases to produce ova, and consequently long after the time during which the perpetuation of the species is subserved.

Fifthly, it may be considered as probable that the loss of nervous energy, apart from the actual loss of the generative products, is a more important item in the case of man than in that of any other animal.

Sixthly, so far as the female is concerned,

the generative expenditure is not confined to the maturation of the ova, but is also accompanied by an actual loss of blood, as is the case with no other mammals, except a few of the higher quadrumana. Not only is this the case, but the ova are produced at more frequently recurring periods than is the case with the lower animals.

From the above, it is evident that there is an apparent enormous waste of power in the method in which the generative function is carried out in man, the waste being greatest in the male, but existing in the female as well. The male is subjected to a drain of nervous power and of the matter of life which is practically nearly constant, and from which the other male mammals are free.

REVIEWS AND BOOK NOTICES.

NOTES ON CURRENT MEDICAL LITERATURE.

—We notice the appearance of a splendid French quarterly of 500 pages, published by Victor Masson, and edited by Dr. Hayem, who has secured the assistance of a large staff. The new work is entitled *Le Revue des Sciences Medicales en France et a l'Etranger*, and seems likely to be the most complete quarterly retrospect of Medical literature in Europe.

—The following recent German publications should be of interest:—

Koehler, Dr. Herm. Die locale Anaesthetisierung durch Saponin. Experimental pharmacologische Studien. 8. Halle. \$1.10.

Kraus, L. G. Compendium der speciellen Pathologie und Therapie. 16. Leipzig. \$4.10.

Kugelman, L. Die Behandlung der acuten Exantheme (Masern, Scharlach. Blattern) durch continuirliche Ventilation. 8. Hannover. \$0.25.

Lotzbeck, Dr. K. Der Luftröhrenschnitt bei Schusswunden. 8. München. \$0.70.

—Mr. E. Steiger, the energetic German publisher and importer, is engaged in making a complete collection of American periodical publications for the forthcoming Vienna Exhibition. As there is not less than some 7000 such periodicals, the enormous as well as minute character of Mr. STEIGER'S self-imposed task will at once be evident. He has undertaken it with the

special object of showing the world that, in her periodical literature, as in many other things, America stands at the head of the nations. The value of this collection will be very materially enhanced by the fact that Mr. Steiger has in preparation a complete and accurate catalogue, in which every periodical is enumerated, and its nature, aim, and scope fully detailed in a synoptical index alphabetically arranged. He is also making a complete catalogue of original American publications in all departments. Publishers or Authors desirous of having their publications inserted in his Catalogue, and in the Index, should apply to him for the requisite number of *blank forms*, to be carefully filled up and returned.

—Mr. R. E. DEARBORN is about to publish, through J. M. Baldwin, 805 Broadway, New York, a "*Handbook of Medical Education in the United States*," containing full information in regard to all the medical colleges, hospitals, dispensaries and other facilities for medical instruction in this country. It will be illustrated, and is expected to be out this Spring.

BOOK NOTICES.

Manual of Chemical Analysis as applied to the examination of Medical Chemicals. A Guide for the Determination of their Identity and Quality, and for the Detection of Impurities and Adulterations. By Frederick Hoffman, Ph.D. New York, D. Appleton & Co., 1873. 1 vol., cloth, 8vo, pp. 398.

The appearance of this work must be regarded as very timely. The competition of producers and manufacturing chemists constantly offers immense premiums to the skillful adulteration of druggists' preparations. Much of the skepticism in therapeutics which prevails is due to the inertness of the ordinary articles sold as medicines. That the physician and pharmacist may have it in their power to examine by the most approved method, the articles they dispense and prescribe, the author has carefully collected and arranged in accessible form the most trustworthy tests of purity in medicinal chemicals.

The first part of the book is devoted to an exposition of the principles of qualitative

and volumetric analysis, and a discussion of operations and re-agents. The second part is occupied with medicinal chemicals and their preparation. This has been compiled with special reference to the fifth decennial revision of the U. S. P.

Of course, in the compass which the author has allowed himself, he has been forced to omit much that larger treatises contain, and to select from many processes those he deemed the best. This required a mature judgment, and doubtless many useful procedures cannot be included; but from the examination we have made we can testify to the sound discretion in the work of selection which he has shown.

The work is freely and well illustrated and manufactured in the best style.

Lessons in Elementary Anatomy. By St. George MIVART, F. R. S., etc. London and New York: Macmillan & Co., 1873. 1 vol., 32mo, cloth, pp. 535.

Mr. MIVART is well known for his profound studies in comparative anatomy, and the present manual will increase and familiarize his reputation to students in both hemispheres. It is very different from the ordinary "Anatomies," with whose dry, meagre and barren details we have all been so long familiar, and so little delighted. Anatomy, as we have at sundry times showed in these pages, is no mere catalogue of bones and muscles, but a study of types and forms. The book before us is one of the first to recognize and bring this out.

Taking man as the type of animal structure, Mr. MIVART studies his conformation in its relation to the structure of other animals, illustrating the variations and peculiarities of the highest type by comparisons with inferior forms. It is a sort of *Handbook of Human Morphology*. The most recent additions to anatomical science are included, though we regret that Mr. MIVART does not mention the date and discoverer of these facts. The reason he assigns, that he does not wish "to overload a school-book with notes," is entirely insufficient, and when no sort of notice is taken of the historical development of a science, the proper study of that science is incomplete.

The work is carefully printed and illustrated with over four hundred engravings on wood. As a forerunner of a different and higher type of anatomical text-book we cordially recommend it to our readers.

MEDICAL AND SURGICAL REPORTER.

PHILADELPHIA, APRIL 12, 1873.

S. W. BUTLER, M. D., D. G. BRINTON, M. D., Editors.

☞ Medical Societies and Clinical Reports, Notes and Observations, Foreign and Domestic Correspondence, News, etc., etc., of general medical interest, are respectfully solicited.

Articles of special importance, such especially as require original experimental research, analysis, or observation, will be liberally paid for.

☞ To insure publication, articles must be *practical, brief* as possible to do justice to the subject, and *carefully prepared*, so as to require little revision.

☞ Subscribers are requested to forward to us copies of newspapers containing reports of Medical Society meetings, or other items of special medical interest.

We particularly value the practical experience of country practitioners, many of whom possess a fund of information that rightfully belongs to the profession.

The Proprietor and Editors disclaim all responsibility for statements made over the names of correspondents.

THE CAUSE OF EPIDEMICS.

Lord Bacon has given a terse and prosaic turn to a well-known Virgilian verse, in his famous sentence, *Verum scire est per causas scire*. But how hard it is to come to any comprehension of the causes of things! Even the proximate, exciting causes of such common events as diseases, how little we know about them! The pestilence that stalks through the land at noonday, how is it originated, how conveyed? The learned differ, the closest observers are at fault.

There is first the theory that there takes place a direct contagion passing from person to person, through actual contact or fomites; and there is the theory of a miasm, an "epidemic constitution of the atmosphere," as a celebrated English physician of the olden time expressed it.

Both of these suppose a specific disease germ, a definite poisonous something, though distributing itself in diverse modes. Here, again, the theorists are at issue. One party hold this poisonous something to be a ferment, vegetable in character, rapidly propagating itself, its sporules filling the air or passing from house to house in fomites. Another party speaks for the *con-*

tagium animatum, the germ or parasitic theory, and being supported by several striking arguments, they have pushed their theory into conspicuous prominence of late. Low forms of animal life have been discovered uniformly and intimately associated with certain epidemic diseases. That they may be the exciting cause of these diseases, or at least the instruments of their dissemination, is an easy step to take.

A broader theory than either of these teaches that epidemics are not the result of specific poisons, but of influences or factors of disease always and everywhere prevalent, suddenly brought into activity by causes of secondary character.

Such is the position which we believe is assumed and defended by the latest authority on epidemics, Dr. Fr. OESTERLEN, in his work *Die Seuchen, ihre Ursachen, Gesetze und Bekämpfung* (H. Laupp, Tübingen). The attention which he gives to the prophylactic and quarantine measure should excite general interest at this epoch, when we are threatened with an invasion of the Asiatic cholera. The fact that there is such diversity of sentiment on these most important safeguards to the public health, proves conclusively the urgent need of a thorough investigation of the topic from some new point of view; and this, we understand, he does satisfactorily.

That something else than mere contact is at work in disseminating the seeds of the pestilence is a conclusion forced on nearly all observers. To quote one of many such expressions, in an article on a recent epidemic of small-pox in Ireland, DR. THOMAS DABRY, F. R. C. S., remarks, "I cannot avoid, while treating of the late epidemic, reiterating an opinion to which I have already given expression in this room, that however confident we may be that certain diseases are communicable from the sick to the healthy, we must also feel satisfied that some other influence beside contagion, be that what it may, does exist, which is com-

petent not only to cause the spread of, but also to originate those diseases."

Such is apt to be the result of a close study of these diseases, and it leads us back to a belief in general rather than specific factors.

SHALL WE TIE THE CORD?

Our readers will remember that this question has been discussed in this journal, pro and con, by Drs. A. F. A. KING, HIRAM CORSON, and some other writers.

It is really a very important one in obstetrical practice, and deserves close consideration. Quite lately, Professor FRANCESCO RIZZOLI, of Bologna, has written an Essay on the topic entitled "*Sulle Cagioni Anatomico-fisiologiche per le quali nel Feto Umano cessa spontaneamente il Corso del Sangue nel Funicolo Ombelicale, e se ne rende d'ordinario superflua la Legatura*," and endeavors to settle the point experimentally.

We may omit the experiments in which the cord was torn, divided by laceration, or gnawed with the teeth. We are prepared for the result by what happens when, by sudden parturition, the cord snaps or breaks spontaneously, or rather as a natural act; there then ensues no bleeding. In a number of experiments, however, about thirty, the division was made at the distance of a few centimètres from the abdomen of the child (with one exception), after pulsation had ceased for five or six minutes in the portion of the cord nearest to the infant, and for three to four minutes in that portion nearer to the placenta. In some of these cases the placenta was already expelled, in others it remained in the womb at the time of section.

In exceptional instances, section was practiced before the expulsion of the child. In twelve cases, no effusion of blood happened on division with a cutting instrument on the side of the umbilicus, and only in a few of them on the side of the cord attached to the placenta; so that, as to the safety of the child, no ligature could in these cases

have been requisite. As for the remainder, in three cases the vein was large and turgid with blood, and it was consequently thought best to tie the cord on the part next the infant. In five instances the child breathed perfectly well, but it was considered necessary to tie the cord from the circumstance of a quantity of blood issuing even after its arteries had ceased beating for some minutes; and in the last case related, in which the infant neither breathed nor cried, the cord was cut two minutes after pulsation had ceased, and no ligature was applied until after the lapse of three minutes, when, on the occurrence of a certain loss of blood, it became necessary to tie the cord. After any longer space than that of a few minutes subsequent to cessation of pulsation, division of the cord does not lead to any risk whatever of loss of blood.

The conclusion of Professor Rizzoli is that it is better to tie the cord as a precautionary measure in all cases, though in many it is a superfluous care. These studies may be considered to solve the problem and establish the practice in these cases.

NOTES AND COMMENTS.

"Apoplexy, or Cerebro-Spinal Meningitis."

In reference to the case reported by Dr. Thompson in this journal, Feb. 8th, 1873, under this heading, Dr. J. W. COMPTON, of Evansville, Indiana, writes:—

As I have not seen any expression of opinion, as solicited, I offer some remarks naturally suggested by many years of practice in this western country, where the physician is so often called upon to combat the many alarming and frequently dangerous symptoms produced upon the human system by malaria, which abounds here, and is marked by exacerbations, intermissions or periodicity. An intermission is well described in this case from eleven o'clock A. M. to eight o'clock P. M. When the Doctor left his patient at the commencement of this intermission, he says: "I prescribed no medicine to be administered during my absence." This appears to me an omission, and a valuable opportunity lost. The expe-

rience of the physician here would cause him to anticipate a recurrence of the congestion, and adopt prompt measures to prevent its return. Recognizing the invaluable anti-periodic properties of sulphate of quinine, he would adopt something like the following treatment during the intermission: Five grain doses of sulphate of quinine every three hours, or four grain doses every two hours, until fifteen or eighteen grains had been administered, when the second chill, if it had returned, would have been much modified, or perhaps its recurrence entirely prevented. A repetition of the remedy in smaller quantities might have made a favorable termination of the disease.

The Causes of Blindness.

Dr. HIRSCHBERG, in an article in the *Berliner Klinische Wochenschrift*, Jan. 27th, 1873, gives the causes of blindness in one hundred instances, excluding curable cases, which had come under his notice among about 7500 patients, in the course of three and a half years. There were three cases of congenital blindness; sixteen of blindness from blennorrhagic ophthalmia neonatorum; seven from conjunctivitis occurring at later periods; two from diseased cornea; six from disease originating in the uveal tract; twelve from glaucoma; two from staphyloma posticum malgrum; four from suppurations of the retina; two from retinitis pigmentosa; two from simple atrophy of the optic nerves; eleven from atrophy of the optic nerves originating in cerebro-spinal disease; four (in children) from optic neuritis; one from cornea of the eyelid; nine from small-pox (six being in unvaccinated persons); two from 'nervous fever;' seven from injury (in four affecting both eyes, and in three one eye only); and in five the cause could not be ascertained.

Gonorrhoeal Ophthalmia.

The *France Medicale* reports a case of gonorrhoeal ophthalmia, under the care of M. Richet, in the Hotel Dieu Paris. Both eyes were simultaneously and severely attacked, and the pain was excruciating, and accompanied by a notable increase in the size of the eyeballs. Ordinary means having failed to alleviate the pain, M. Richet made an incision to diminish the intra-ocular pressure. He made it so as to affect at the same time the cornea, sclerotic and cilli-

ary circle, incising to the extent of nearly five lines. The left eye, which was the worst, was the one operated on. The aqueous humor escaped through the opening, and a small portion of the vitreous. The results were immediate diminution of the pain, and at the end of three weeks, a much greater improvement in the functional and general state of the eye than was observable in the right one. A scarcely visible cicatrix united the divided tissues.

Dr. Calvi and "Holopathy."

At the close of February the well known Dr. MARCHAL DE CALVI died in Paris. He was the author of several works, and his treatise on the *Accidents and Complications of Diabetes* is one of the best monographs on the subject, though the principles therein enunciated are in contradiction to his new doctrine, which since the year 1859 he had endeavored to inculcate, and to which he gave the name of "holopathie," or "médecine holopathique," not to be confounded with allopathy. Holopathy, according to the author, is a system of medicine which regards the different diatheses as mere manifestations or phases of a single morbid act (*unite morbide*), which morbid act he terms "acidisme," or the tendency of the organism to become acid. Thus arthritism, herpetism, rheumatism, gout, and diabetes, are manifestations of the above grand class. As for the so-called diseases, they also are mere manifestations or signs of a holopathic condition; in other words, the diatheses and diseases, whether local or general, are the divisions and subdivisions of some morbid unity of which the above is an example.

Medical Matters in Berlin.

A correspondent of the *Boston Medical and Surgical Journal*, writing from Berlin, in March, says:—

The number of American students is not large, perhaps a dozen, as Vienna still offers greater attractions in the way of short, private courses.

But it is here a very mild, unhealthy writer, and the amount of interesting material at the Charité was never greater. At the Pathological Institute, Virchow has much more than he can dispose of in the two mornings in the week on which he lectures, and he, as well as his assistants, appear to be so hurried, that one is not likely

to receive much individual instruction in the laboratory; so, apart from the great number and variety of morbid specimens to be seen here, a smaller University, say Leipzig or Wurzburg, would, perhaps, afford better opportunities for pathological and microscopic studies.

The same is not true in the clinical department, and the variety of cases exhibited, by Frerichs especially, and his powers in differential diagnosis, make his clinic at present unequaled by anything in Germany. Much as we hear of the superiority of German medical education, and unquestionable as it is in some respects, the students who are called up at these clinics make a pretty poor show. For, either from over-awe of the professors or ignorance, they rarely make the diagnosis, though they always have an opportunity of examining the cases beforehand, and are frequently unable to answer questions which one of our third year's students would be apt to know. However, the professors seem to take considerable satisfaction in solving their own conundrums, and from long experience do it very well.

Snuffing the Moon!

The appended quotation from the *Richmond and Louisville Medical Journal*, for February, escaped our notice till now. As its intention, presumably, was to impart information, we snatch it from obscurity and give it the benefit of our circulation, for modesty will forbid our weekly contemporaries giving it publicity in their columns!

There is a grievance, without doubt. Indeed, we had a foreshadowing in a letter, some months since, of something coming; but as we were not prepared to make any "little arrangement," we gave the matter no attention, and have been ever since meekly awaiting the blow. We can stand it, or anything else from that source!

"* * * Else, Jupiter! snuff the moon!
Zounds, thou envious god, thou'st
snuffed him out!"

WEEKLY MEDICAL JOURNALS.—As inquiries are frequently made in regard to the best weekly medical journals, readers are recommended to obtain the "Philadelphia Medical Times," or the "Boston Medical and Surgical Journal." Either of these works (or both) is recommended. There is a weekly medical periodical published in Philadelphia, and known as "THE MEDICAL AND SURGICAL REPORTER." This, however, is more a weekly medico-secular

newspaper than a weekly medical journal. As a work of scientific value or medical interest, it cannot be compared with either the "Philadelphia Times" or the "Boston Journal." As an accurate opinion is often desired, it is frankly given.

Jefferson Medical College.

We are glad to observe that the effort in the State Legislature to strike out the appropriation of one hundred thousand dollars to the Jefferson Medical College failed, and it will receive the amount asked for.

We observe, too, that in accordance with our suggestion, a location is being sought on Broad street for the new college and hospital. The splendid plot of ground at the corner of Broad and Pine streets, at present occupied by the Pennsylvania Institute for Deaf Mutes, is spoken of. There is scarcely a more desirable location in the city, and we trust the friends of the College will not fail to secure it.

The Toner Lectures.

Dr. J. J. WOODWARD, U. S. A., delivered, March 28th, the first of the lectures established by Dr. J. M. Toner, of Washington, to encourage the discovery of new truths, and for the advancement of medicine. Dr. Woodward's subject was "The Structure of Cancerous Tumors, and the manner in which adjacent parts are invaded." The second lecture will be delivered April 18th, by Dr. Brown-Sequard. The Trustees of the Toner Fund are, the secretary of the Smithsonian Institute, the Surgeons General of the U. S. Army and Navy, the President of the Medical Society of the District of Columbia, and the originator of the Fund.

Fistula in Ano.

Dr. HUTE employs an ethereal solution of iodine in fistula in ano, which is more exciting than the tincture. Patients are not obliged to keep their beds. He has had several cures after one injection.

CORRESPONDENCE.

Will Vaccination Abort Small-Pox?

EDS. MED. AND SURG. REPORTER:—

On the 6th of February I was called to see a child seven months old. The father said he thought it had small-pox. It presented all the usual symptoms of this peculiar fever, and as there were three cases of small-pox

within half a mile of the little patient, there was good reason to suppose that, if atmospheric susceptibility would produce it, it was a true case of small-pox. There were constipation and fever on Friday, and on Saturday, in the mouth, there were the peculiar ash-colored spots and miliary eruption well out on the face, neck, arms, and breast.

I vaccinated the patient at once. The eruptions were small, discrete, and had the peculiar feel of a small shot under the skin; the fever had disappeared, and the child seemed playful. I saw it every day for five days. The vaccine "took beautifully." The eruption continued regularly down the body on Sunday, and on Monday had reached the feet, being thoroughly characteristic. On Tuesday it commenced to fade (as the vaccination developed on the arm) on all parts of the body, and by Saturday next following the vaccination all the eruptions had disappeared. No secondary fever, not even the fever from the vaccination, was ever apparent, and I came to the conclusion that I had, by prompt vaccination and thorough opening the bowels, aborted a case of incipient small-pox. I reported this to my friend, Dr. WEATHERSPOON, of this city; and he related to me a very similar case occurring in his practice, in the case of a young man who had slept with a friend for fifteen days before a genuine case of small-pox developed in the latter. Dr. W. adopted the same treatment as in my case, reported above. The eruption came out beautifully, and he said he expected a case of small-pox, of course, as the young man had been so thoroughly exposed, but to his joy, as the vaccination developed the eruption receded, and no small-pox ensued. Will some of the Faculty answer (if they can) the question?

A. P. BROWN, M. D.

Jefferson, Texas.

Bromide of Potassium in Epilepsy Not a cure.

EDS. MED. AND SURG. REPORTER:—

I report for your readers the following case:—

R. E., æt. 30, on whose education and culture much money and care had been expended, had for years feelings of vertigo, as he termed it. Five years ago epilepsy in a severe form struck him down in the street. Bromide potass. was immediately prescribed, and for three months no severe attack, but frequent light ones, amounting during 1868 to 25, only one severe: by this is meant a violent fit, or fits, with unconsciousness and slight spasms all night long. During 1869 there were 17 attacks, only one very severe, about six weeks apart. During 1870 slight attacks in March, April and September. Twenty grs. bromide potass. in chamomile tea had been taken regularly during these years, with decided benefit. For about one week in 1870, by mistake, 80 grs. had been taken *ter die*, accounting at once for a staggering gait and stupid condition noticed by

the friends. So slight were the attacks during 1871 that he ceased to make notes in his diary. Through 1872 he passed, as through 1871, with efforts to leave off the medicine, resulting each time, at brief periods, in a return of the old symptoms. He is confident in the power of the bromide to prevent, and as confident that it will not cure. For five years no patient ever more religiously attended himself as to medicine and diet, taking almost without intermission twenty grs. bromide *ter die* for five years, and for three years of the time without meat; farinaceous diet, with poultry, eggs fish, and milk, using no spirituous drinks, during summer a little porter, keeping up the system with quinine, iron, and cod-liver oil as required.

From this and numerous other cases in private practice, without organic complications, as well as about one dozen in the Sussex Co. Almshouse, which has been for several years under my charge, I am forced to believe we have no remedy in bromide of potass. (nor bromide ammon., both which I have largely used) to cure epilepsy, but they are the best known preventives of paroxysms in established cases; the very best controllers of morbid cerebral excitability.

C. H. RICHARDS, M. D.

Georgetown, Del., March 4, 1873.

Burns and Scalds.

EDS. MED. AND SURG. REPORTER.

In the January number of the HALF-YEARLY COMPENDIUM there is an article by Dr. MONTGOMERY, of San Francisco, on the treatment of Burns and Scalds, which, upon the whole, accords, I suppose, with the experience of most practitioners. But in my opinion it is at fault in the notice it takes of two remedies in common use. 1st, the linamentum calcis is spoken of as a proper application, but is discarded as being a very offensive one. Now when made in the old way, with linseed oil, it is disgusting to the senses, but as it is often now made, with good sweet olive oil, it is not at all offensive, and is at the same time much more soothing to the sensitive nerves of the burned or scalded part, and also has the advantage of keeping moist a much longer time than that made with the linseed oil. It is a wonder that any one who has ever given the matter a moment's thought should continue to make liniments to apply to irritable surfaces, of this hot stimulating oil, which is chosen by the painter above all others, because it dries quickly. The same idea extends to the linseed meal, recommended among other things as the proper ingredient of a poultice. Now I have often wondered if those learned and skillful men who daily, and many of them hourly, are prescribing flaxseed poultices, ever had occasion in their own persons to know the difference of feeling between this poultice and that of one made of simple bread, water, and lard, or any other bland farinaceous substance, or slippery elm. It seems to me if

they had, a sense of kindness to suffering flesh and blood would lead them always to prefer the latter to the former. We do not blame the trans-Atlantic practitioner so much, who is not practically acquainted with the virtue of slippery elm, as there it is not so easily obtained, while the flaxseed has always been their household ingredient for a poultice. But the American physician, who can always obtain the slippery elm, so cooling, soft, and bland, is inexcusable for not preferring it to the hot, irritating flaxseed.

Thinking of flaxseed as a proper ingredient of a poultice, perhaps many are led astray by the idea of the glutinous, demulcent and soothing flaxseed tea, taken internally to relieve irritation of the mucous membranes. Now flaxseed used in the same way as a poultice, the flaxseed being unbroken and the glutinous property being merely drawn out by the action of water, would answer a good purpose as an emollient, but when we take the flaxseed meal we get far more of the oily than of the glutinous properties of the article. If any one will let flaxseed meal remain in a paper for a few hours and then look at the paper saturated with oil, they will observe what a quantity of oil it contains.

Now the hot drying oil gives the character to the poultice, and that character is of a heating, irritating nature. I first learned to appreciate this in a severe boil on my hand, to which, in succession, I applied several different kinds of poultices, and particularly remember the change from a flaxseed to a slippery elm poultice: it was what I might imagine it to be to get out of a scorching flame into a tepid bath, from torment to comparative comfort. I have followed up this, in observing the effect of linseed meal on various diseased states of the surface of the body, and particularly as applied to the inflamed mamma. I here have often seen the gland in a few hours intensely reddened and tumefied, matters made in every way worse, and an abscess of twice the dimensions it would have been under a more cooling and soothing line of treatment. Without taking up further space, I feel it a duty to call particular attention to this, though seemingly a little matter, yet one which, on account of its every-day application, must, in the aggregate, have much to do with human comfort, as well as with the success of the practicing physician.

ALEX W. ROGERS, M. D.

Paterson, N. J., March 25th, 1873.

NEWS AND MISCELLANY.

Faith as an Element of Power in the Physician.

The address of Dr. EDWARD WARREN at the recent commencement of the College of Physicians and Surgeons, of Baltimore, was one of more than ordinary excellence. We select some paragraphs, which our readers will find will repay perusal.

"The true physician must not only be a faithful student but an earnest believer. He must not only be possessed of knowledge, but imbued with *faith*; faith in his *God*, faith in his *profession*, and faith in *himself*. A belief in the existence of a personal God, and the necessary concomitants of man's responsibility and immortality, is the condition precedent of an adequate conception and proper discharge of the duties which you have so solemnly assumed to-day. Without this fundamental faith, this settled conviction, human conduct is deprived alike of its incentive and its sanctions; and the physician, in common with every member of the human family, is left to the guidance solely of his own feeble judgment and imperious passions, only to lapse into a condition of selfishness utterly at variance with the true scope and dignity of his profession.

"I regret to say, that though medicine, when rightly studied, cannot tend to unbelief or rationalism, as it is called at present, many physicians have accepted its delusive dogmas as the dicta of an advancing science. Assuming the insignia of legitimacy, and appealing to certain revelations, or rather speculations, of physiology, it has allured many a true man from the path of duty. If this temptation has not already assailed you, it will assuredly come; and you should be prepared to meet it, or else pay the penalty which it exacts in lives of uselessness and deaths of sorrow. Though painfully conscious of my own unworthiness to assume the role of an exemplar in this regard, I esteem it a sacred duty to warn you against a fallacy which, in the livery of truth and in the name of reason, would sap the foundations of your religious faith, and bind you to the chariot-wheels of a hopeless and inexorable infidelity.

"As specious as may be the arguments by which the advocates of rationalism would prostitute your judgments, and lead captive your imaginations, they are controverted by facts as enduring as the everlasting hills, by the testimony of nature, the necessities of humanity, and the whole system and government of the universe.

"As I have before remarked, without this fundamental faith, this absolute conviction of supreme power on the one hand and personal responsibility on the other, human conduct is deprived alike of its incentive and its sanctions. Each member of the human family is transformed into a law-giver, and made the sole interpreter of his own imperial edicts. Between truth and error, between the domains of the right and the wrong, the grand and immutable line of demarcation, traced by the hand of Divinity itself, is obliterated, and the human intellect, which is but the type of fallibility and uncertainty, is left to draw others at will by the flickering light of its own ideas and experience. The whole moral world is transformed into a theatre of commotion, of eternal and still augmenting conflict. Man's accountability and responsibility become the mere playthings of his own caprice, and

virtue, justice, and religion lapse into nothingness, as 'the baseless fabric of a vision.'

"Whatever be the revelations of the scalpel or the discoveries of the microscope, it is logically impossible that a just and good God could have created man, with all the noble powers and lofty aspirations and tender sympathies which appertain to him, simply for a terrestrial destiny. The supposition that love, with all its boundless scope and capabilities, that 'hope, which springs eternal from the human heart,' and that desire for immortality, wherein all families and races of men have delighted to indulge since their creation, should have no final Cause, should have been called into existence simply as a source of disappointment and of sorrow, is more than a paradox; it is fatuity and criminality combined.

"Let vital phenomena be interpreted, therefore, as they may, the soul's immortality, the perpetuation of consciousness and identity, when the physical organism has dissolved into its native elements, is necessary for the vindication of that equity and mercy which are the essential elements of Divinity.

"Remember, then, gentlemen, if God reigneth, if creation be not the work of accident or magic, materialism is false, since it is contradicted by the surest and noblest of His attributes; and that the simple but most glorious faith, which you learned in the days of youth and innocence at your mother's knee, is worth all the grand philosophy of the schools, and that though assailed as a fallacy and sneered at as a dream, it is destined to endure while a human heart shall thrill with the instincts of humanity, and to stand unscathed amid 'the wreck of matter and the crash of worlds,' an eternal monument of God's mercy, and the perpetual shibboleth of man's salvation.

"You must have faith also in your profession. This is emphatically an age of skepticism. The human intellect seems to shrink from credulity and to incline to unbelief. Medicine has felt the blighting influence of this universal infidelity, and suffered great detriment accordingly. It has become fashionable among those who should be its champions to repudiate many of its principles, and to ignore its claims to the dignity of a science.

"The question of the truth or fallacy, the value or the worthlessness, of medicine, is essentially a practical one.

"Man finds within him a horde of morbid elements, which experience proclaims the agencies of decay and the ministers of death. The hand with which he wields the weapon of defense, the implement of industry, or the pen of genius, falls, at an unexpected moment, palsied and powerless. The sense through which his delighted soul takes in the beauties or the harmonies of nature is suddenly obscured or obliterated. The frame whereon Divinity has traced its image and made a monument of strength and a temple of beauty, wastes and dissolves

under the influence of some subtle poison. The heart, which swells to the prompting of ambition, or the whispers of love, or the demands of duty, forgets its role of rhythm, and pulsates wildly or beats no more forever. And reason, God's vice-regent and emanation, the intellect, which communes with the infinite, or revels in the creations of poesy, or dallies with the lore of ages, or follows the fiery courses of the stars, or chains the lightning to the car of thought, and makes the forces of the earth and air and sea its slaves and ministers, abandons its throne, and lapses into fatuity or forgetfulness. In a word, the daily experience of every child of mortality coerces him to a realization of a necessity for some system of medication by which his sufferings may be relieved and his life prolonged upon the earth.

"It is equally true that wherever an habitation has been prepared for the human family, there, within the rugged rock, or the blooming flower, or the murmuring stream, remedies have been garnered which are the antagonists of pain and the allies of vitality. Medicine is the science which assumes to investigate the physical necessities of man, and to apply the remedies which God in His wisdom has created for their relief. Experience must, therefore, be appealed to in order to determine whether or not it has performed its mission properly, and the extent to which it deserves the confidence of mankind. The question as to whether the profession of your choice is entitled to your fullest faith, is one for facts and not for arguments; is to be determined by an appeal to figures and not to speculations. I have not time for a proper investigation of this question, but it is sufficient to say that the most reliable statistics conclusively demonstrate that, with a better understanding of the principles of hygiene and the laws of disease, whole communities have been rescued from maladies which had previously carried off thousands annually."

The point is further illustrated by a reference to the protecting power of vaccination, and to the control the physician and surgeon have over pain.

"Such is the proud record to which I appeal when I bid you repudiate the emasculating skepticism which denies to medicine its legitimate place in the confidence and affection of men, and to cultivate a lively and abiding faith in its high prerogatives.

"But, gentlemen, let me urge you to the utmost candor in this regard. Act honestly in this as in all other things. Your profession is either a grand truth or a stupendous fallacy; it is all that it claims to be or it is nothing; and it is your duty to decide promptly between these two extremes of opinion, and to act upon your convictions. If you are not true believers in the profession you have chosen, you but assume duties which will prove a source of disgrace to you and of disaster to the public.

"If yours be only the lip service, the hypocritical homage which pride, or convenience,

or cupidity inspires, careers of dishonor and disappointment will assuredly be your destiny. If there be one of you, therefore, who has the slightest doubt as to the exalted mission and real efficacy of medicine, I call upon him, in the presence of God and of these witnesses, to act the part of honor and justice, and to tear up his commission and seek some more fitting employment. Unfurl your banners to the breeze, with faith inscribed in letters of blazing light upon their every fold, or furl them forever before they have trailed in the dust, a disgrace to you and a reproach to your profession.

"But, on the other hand, if you have a proper faith in the calling you have chosen, and for which I believe you to be so well prepared, a bright and inviting future is before you. Hope will shed its blessed radiance over your pathway; confidence will, with a magic power, lighten your burdens and bear you onward, and the consciousness of duties fairly met and honestly performed will give to your declining years a tranquillity and a triumph which no caprice of fortune can take away.

"When this active faith has disseminated itself throughout the profession a new and a brighter era will dawn upon it; an era whose history will be illustrated by a broader sphere of usefulness for itself and still more brilliant successes for its votaries. The physician will then stand forth in his true character, not veiled in mists of superstition, nor the delusions of infidelity, nor the shroud of selfishness, but the disciple of science, the exemplar of Christianity, the representative of a philosophy which courts investigation and challenges criticism, and whose triumphs have been won by giving to thought its largest liberty, to controversy the amplest opportunity, and to nature the most rigid application of her laws."

Hospital for Women in Vienna.

The Maria Theresia Hospital for Women in Vienna, the idea of establishing which was brought forward by Dr. Beigel in April last, was opened on December 15th. Dr. Beigel, as director, delivered an address on the occasion, in which he stated that during a residence of ten years in England he had never seen an institution of the kind grow into working order so rapidly. As reasons for establishing the hospital, he referred to the fact that the treatment of diseases of women had become a specialty, and also to the comparatively lower mortality in small hospitals and private practice than in large hospitals.

Appointment.

Professor George F. Barker, who has occupied the chair of physiological chemistry and toxicology in the medical department of Yale College, is about to leave that institution. He has been elected to the chair of physics in the University of Pennsylvania, and will enter upon his duties about the middle of April.

Physicians in Prussia.

It appears from the Prussian Medical Calendar, that in 1871 the number of qualified practitioners, including surgeons of the first class, was 7154 in a population of 24,643,416, being one medical man in each 3444 inhabitants. At the end of 1870, the number of practitioners was 7367; of 1869, 7451; of 1868, 7446; of 1867, 7420; of 1866, 7281. Thus the number of medical men has not only not kept pace with the increase of the population, but has actually diminished, being 127 less at the end of 1871 than at the end of 1866. At the end of 1867, there was one medical man to each 3231 of the population; while at the end of 1871 the proportion was reduced to one in 3444. At the latter date, the population was about 688,000, more than at the former; while the number of doctors were diminished by 266.

Absinthe.

A French commission, consisting of experts, has just made a report, reviewing all the methods employed in the manufacture of absinthe, and the great loss of life entailed by its use in France. They recommend that this article be included in the list of poisons, and that its sale be interdicted, excepting on prescriptions of a physician. They think its sale should be visited with heavy penalties, and that every effort ought to be made to break up the indulgence in an article possessing such poisonous properties. It is not the absinthe alone that proves so dangerous, but the inordinate consumption of alcohol that accompanies it. Some who are addicted to it have been known to take thirty glasses of absinthe every day, the greater part of which is absolute alcohol.

Humboldt.

It is well known that Alexander Von Humboldt died in a state bordering on poverty. His financial embarrassments were caused by his loss, in 1843, of the sum of \$9000 or \$10,000 in gold, which the King of Prussia had presented to him. At the time it was believed that the money had been stolen from the great savant; but the police were unable to find any clue to its disappearance. Strange to say, a short time since the gentleman now living in the house formerly occupied by Mr. Humboldt found the money in a small box, among some old rubbish in the cellar. How it got there puzzles Humboldt's intimate acquaintances exceedingly.

Climate of Western Texas.

Dr. F. A. PETERSEN, of San Antonio, Texas, has made a series of careful observations on the climate of that locality. The total rain-fall last year was 31.62 inches, mean temperature 68.47°; the hygrometrical mean was 62°.

Erratum.

On page 265, current vol., col. 2, for "1855 and 1856," read "1865 and 1866."

The Medical School of Montpellier.

The French Government has closed this school entirely, owing to disturbance among the students. It appears that some student addressed a letter to the Mayor of Carcassonne, protesting against a judicial sentence pronounced against him. During the subsequent deliberation of the Academic Council, the students assembled and interrupted the lectures which were being given, and repeated the disturbance next day. Hence the closure of the Medical and Pharmaceutical Schools.

Hydrophobia.

From an official report, it appears that in England and Wales, in 1870, there were thirty-two deaths from hydrophobia, all the cases occurring north of the Trent. According to this report, hydrophobia is periodic in its character. Statistics for the last thirty-two years in reference to this disease are cited in support of the theory.

Unchivalrous.

The faculty of the Pennsylvania College of Dentistry have determined not to have, hereafter, any female students.

—The thirtieth annual commencement exercises of Rush Medical College, Chicago, were held on Wednesday evening, Feb. 19. The degree of Doctor of Medicine was conferred on sixty-two in course, and the honorary degree on four. President Freer delivered the annual address to the class; Dr. F. R. Smith, the class valedictory.

—The Hon. T. S. Faxon, of Utica, has recently given \$50,000 for founding a hospital within the corporate limits of the place, to be known as "The Utica Faxon Hospital." Other donations of a liberal character, it is expected, will be added, to the amount of \$100,000 or more.

—Dr. William D. Wood, of Jamaica, Long Island, was recently swindled out of a considerable amount by a tutor of his son, who started with the lad ostensibly on a tour to Europe, but forsook him in New York, and left for parts unknown.

—Herbert Gray Torrey, the only son of the late Dr. John Torrey, United States Assayer, has just been appointed to the position rendered vacant by the death of his father.

—Governor Hartranft has appointed Dr. A. W. Matthews, of Media, to be Quarantine Master for the port of Philadelphia, in place of Dr. John H. Gihon, removed.

—The Medical Department of the Indiana State University sent out a class of forty-eight at its recent commencement.

—A California lady has obtained a patent for a medicated towel.

—An anonymous benefactor recently dropped in at St. Peter's Hospital, in London, and left with the Secretary a donation of ten £1000 Bank of England notes.

QUERIES AND REPLIES.

German Medical Dictionary.

There is no German edition of Dunglison's *Medical Dictionary*.

Dr. Charles Darwin.

Dr. W. B. W., of Ark.—Mr. Charles Darwin is entitled to the title of Dr., by an honorary degree; he is not an M. D. by profession.

Pneumatic Aspirator.

Dr. E. W. M., of N. Y.—The price of this instrument is \$25. We regard it as a valuable addition to therapeutic appliances.

OBITUARY.

JOSIAH CLARK NOTT, M. D.—Dr. NOTT, who died in Mobile on the 31st ult., has been well known to the profession, for many years past, as an author, teacher and surgeon. He graduated in 1824, at the College of South Carolina, and in medicine in 1827, at the University of Pennsylvania. He was at one time Professor of Anatomy in the University of Louisiana, and of Surgery in the Medical College of Alabama. He was an honorary member of many home and foreign scientific bodies. Dr. Nott was a frequent contributor to the medical journals of the day, and was one of the authors of the "Types of Mankind," a well-known ethnological work.

MARRIAGES.

HARVEY-SMITH.—In West Pittston, Pa., March 20th, by the Rev. F. B. Hodge, Olin F. Harvey, M. D., of Wilkesbarre, and Sophia J. Smith, of West Pittston.

LAYTON-BENEDICT.—On March 12th, in the Presbyterian Church, St. Augustine, Fla., by Rev. Charles O. Reynolds, Brevet-Major C. Rodney Layton, Captain Sixteenth United States Infantry, and Clara H., daughter of the late Dr. N. D. Benedict.

MISTER-GEIGER.—On Thursday, March 20th, 1873, at the residence of the bride's parents, by the Rev. J. McVey, Jas. F. Mister, Esq., of Grenada, Miss., and Myra C., daughter of Dr. A. Geiger, of Dayton, Ohio.

WHITTAKER-DAVIS.—In Cincinnati, March 12th, by the Rev. Dr. Bellows, at the residence of the bride's father, Dr. Jas. T. Whittaker, of Cincinnati, and Miss Mary Box Davis, of New York City.

DEATHS.

GODFREY.—In Georgia, Vt., March 31st, Dr. James S. Godfrey, late Assistant Physician of Sanford Hall, Flushing.

NOTT.—In Mobile, Ala., March 31st, on his 69th birthday, Josiah C. Nott, M. D., formerly of Mobile, but of late a resident of New York.

WILSON.—At his residence, Penn Avenue, Pittsburgh, March 1st, 1873, Robert Wilson, M. D., in the 51st year of his age.